Case	e 5:14-cv-17976 Document 2 Fi	
		ISTRICT COURT
	SOUTHERN DISTRICT	OF WEST VIRGINIA TERESAL PARTIES
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Tom	meth & aske	27977058
		A
(Enter abo	eve the full name of the plaintiff	(Inmate Reg. # of each Plaintiff)
		(similar stegral system i vaniong))
VERSUS		1 ACTION NO 5:111-11 111111
VERSUS		
4	11	oci to be usigned by Courty
cher	UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF WEST VIRGINIA  Tabove the full name of the plaintiff  (Inmate Reg. # of each Plaintiff)  intiffs in this action).  SUS  CIVIL ACTION NO. 5: 14-cv - 17976  (Number to be assigned by Court)  Livery Co. Determinent Center  Livery Co. Determinent Center  Tabove the full name of the defendant endants in this action)  COMPLAINT  Previous Lawsuits  A. Have you begun other lawsuits in state or federal court dealing with the same facts involved in this action or otherwise relating to your imprisonment?	
	- Regal stre	et
MI	anhor nia	
1100	gray, icc	
	, 0	THE STATES DISTRICT COURT  FIND DISTRICT OF WEST VIRGINIA  DISCH 27977058  CIVIL ACTION NO. 5:14-cv - 17976  (Number to be assigned by Court)  COMPLAINT  The defendant  COMPLAINT  In other lawsuits in state or federal court dealing with the same in this action or otherwise relating to your imprisonment?
or defenda	ints in this action)	
	COMPL	AINT
	OWIT	ZMALYA
I. Pre	vious Lawsuits	
A.	Have you begun other lawsuits in facts involved in this action or ot	state or federal court dealing with the same herwise relating to your imprisonment?
	Yes	No

II.	Place of Present Confinement: FC 6 La Kleck Loy	
	A. Is there a prisoner grievance procedure in this institution?  Yes But I want applied  No at this push  But I want the facts relating to your samplaint in the state prisoner.	ten
	B. Did you present the facts relating to your complaint in the state prisoner grievance procedure?  Yes No	
	C. If you answer is YES:	
	1. What steps did you take?	
III.	Parties posability the stoff could place me in	) Oors the
some p	Address: federal Covertional institute  Address: federal Covertional institute  Beckley Po Bot 350  B. Additional Plaintiff(s) and Address(es):	1: 3

(In item C below, place the full name of the defendant in the first blank, his/her official position in the second blank, and his/her place of employment in the third blank. Use item D for the names, positions, and places of employment of any additional defendants.)

C.	Defendant: Long, know her fust mome
	is employed as: growchenokee . Co Detention
	at
D.	Additional defendants: the Desgent on duty
	that day his first mome
	uos mel.

## IV. Statement of Claim

State here as briefly as possible the <u>facts</u> of your case. Describe how each defendant is involved. Include also the names of other persons involved, dates and places. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of related claims, set forth each claim in a separate paragraph. (Use as much space as you need. Attach extra sheets if necessary.)

L'have evidence that one of the jailors, at cherokee CD. Detention center, deliberatly unlock a electric door and 4 imates come into my Room and assaulted me this assault was witteness by my & Room mates there momes one I glen aske, poul outs today ackson, these some imates, have assaulted several en mates. Before I was attack, her opening the book persented a obvious risk to me, she threw of there prior assaults.

IV. Statement of Claim (continued):
there where pictures took, and reports
ANDOR By officers at the jail a l'hall
Been in medical ever since the ottack
I have several doctors opions al howent
regained the use of my me arm, lue
tried theropy ect. I had a MRI on
5/14/14. But I on in poin sond it
unable to use my arm belly as of now
and may never regain fell use of my own.
V. Relief

State briefly exactly what you want the court to do for you. Make no legal arguments.

Lant know if I will ever be

able to use my orn fully orgain

due to the factors acts.

I don't know if she wasn't trained

Correctly. or if it was deliberate,

L want the court to appoint me

a attorney to Repersent me for the lost

of my arm, and the pain I have

lest through for the last 8 month

and still left in pain, if this

an mot be keased in this district

V. Relief (continued)):	1
from ether happen in the illestern Destric	t
et no capila l'ulas Benina held	
It the holding baility of charoke	e cé
De to time and the in much of nice	
Mention Contactor may 1000 1000	
please formands my 42 usc. 1983 com	plant
to clerk of court 100 otis street tales	
A. If someone other than a lawyer is assisting you in preparing this case, state the person's name:	
mom e_	
B. Have you made any effort to contact a private lawyer to determine if he or she	
would represent you in this civil action?	
Yes No	
If so, state the name(s) and address(es) of each lawyer contacted:	
mome	
If not, state your reasons: In realitying my and m	y
meller Be the some and simply of	life
C. Have you previously that a lawyer representing you in a civil action in this last	gui
court?	1
Yes No	

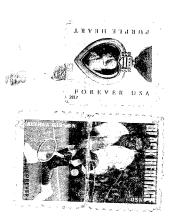
If so, state	the lawyer's name and	address:	
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Signed this	day of	, 20	·
		-	
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	Lina	reth & ask	2
	Signature o	Plaintiff or Plaintiffs	
declare under penalty of	of perjury that the fore	going is true and correct.	
Executed on 6/			
	KENN	1EH E AS	hE
	Signature o	f Movant/Plaintiff	
			•
		<i>!</i> *	
Signature of Attorney			

Kenneth Aske 27977-058 Fedral correctional Institutition Beckley P.O. BOX 350

Beaver wu, 25813

⇔27977-058⇔ Clerk Clerger ROOM II9 Unitdstatedistrict C OURT Beckley, WV 25801 United States 110 N Heber ST

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